

AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer No.: 23696
Attorney Docket No.: 000324
In Re Application of: Schiff et al.
Serial Number 10/625,167
Filed: July 22, 2003
Examiner: Dean, Raymond S.
Group Art Unit: 2618

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

| CLAIMS | (a) Number Remaining After Amendment | (b) Highest Number Previously Paid For | (c) Extra Claims | Large Entity Fee | Fee Paid |
|---|--|---|--|------------------|----------|
| Total* | 59 | 59 | | x \$50 = | \$ |
| Independent** | 4 | 4 | | x \$200 = | \$ |
| Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | \$360 | \$ |
| EXTENSION FEES | | | <input type="checkbox"/> One Month | \$120 | \$ |
| | | | <input checked="" type="checkbox"/> Two Months | \$450 | \$450.00 |
| | | | <input type="checkbox"/> Three Months | \$1020 | \$ |
| TERMINAL DISCLAIMER | | | | \$130 | \$ |
| | | | | TOTAL FEE | \$450.00 |

*If the number in column a is less than 20, enter 0 in column c.

**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$450.00.
The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: September 14, 2006

Signature: W. Chris Kim

W. Chris Kim, Reg. No. 40,457

Telephone: (858) 651-6295

QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
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CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

- ☒ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name: Lecanne Lawlor

(type or print name)

Date: September 14, 2006

09/20/2006 YPOLITE1 00000024 170026 10625167

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